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CONFIRMATION NO. 9010

Bib Data Sheet

<b>SERIAL NUMBER</b> 10/718,213	<b>FILING OR 371(c) DATE</b> 11/20/2003 <b>RULE</b>	<b>CLASS</b> 424	<b>GROUP ART UNIT</b> 1615	<b>ATTORNEY DOCKET NO.</b> 45731-0004
<b>APPLICANTS</b> Jillian Jacobson-Alti, Coral Gables, FL; <b>** CONTINUING DATA *****</b> This appln claims benefit of 60/428,007 11/21/2002 <b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **</b> <b>** 02/18/2004</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature Initials		<b>STATE OR COUNTRY</b> FL	<b>SHEETS DRAWING</b> 0	<b>TOTAL CLAIMS</b> 17
		<b>INDEPENDENT CLAIMS</b> 4		
<b>ADDRESS</b> 43463				
<b>TITLE</b> Multi-sensory pleasant lip gloss				
<b>FILING FEE RECEIVED</b> 428	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	